

DENIAL/CHANGE OF ENROLLMENT ELECTION**WS-EN2**

Name/HI Number	Date Applic. Rec'd. by M+CO.	M+CO Denial Verified Approp.?	Denial/Reject Letter Date and Corr. Reason Given?	M+CO Denial made within 30 days time frames specified by HCFA of receipt of completed application?	Comments

Standard: 95 percent correct.

Determination: Transfer results of this sample to the appropriate requirements at EN01 - ~~EN16~~ **EN17** of the *Review Guide*. See Column Explanations for coded requirements related to specific columns.

DENIAL/CHANGE OF ENROLLMENT ELECTION

WS-EN2

Requirement: 42 CFR 422.50(a) specifies who is eligible to elect enrollment in an M+CO ~~Organization~~. If an applicant fails to meet these requirements, the M+CO ~~Organization~~ or HCFA must deny enrollment. Denials are actions that the M+CO take when the M+CO determines the individual is not eligible to make an election (e.g., the individual is not entitled to Medicare Part A or B, the individual has ESRD, etc.) and therefore decides to not submit the election transaction to HCFA. Rejections are actions taken by HCFA when HCFA rejects an enrollment submitted by the M+CO. The rejection could be due to the M+CO incorrectly submitting the transaction, to a systems error, or to an individual's ineligibility to elect M+C.

Purpose: To ~~assure~~ ensure that the enrollment denials/rejections are carried out for the proper reasons and in the proper manner.

Sample : The universe includes all Medicare applications which have been denied/rejected by the organization for any reason, prior to submission to HCFA, during the six months immediately prior to the month of the onsite review. If the M+CO ~~Organization~~ states that no denials are available for that period, increase the time frame to one year.

The denial list must be provided by the M+CO to HCFA about three weeks prior to the onsite review. From this universe and from the universe of rejections, randomly identify 30 cases (or less, if that number does not exist) which have been denied for any reason. About 10 days prior to the site visit, the reviewer will ask the M+CO ~~Organization~~ to pull the files on those cases selected by the reviewer. Portions of this review may be completed as a desk review.

Column Explanations:

Name/HI Number: Self-explanatory.

Date Applic Rec'd by M+CO ~~Organization~~: What was the date the M+CO ~~Organization~~ received the signed application?

M+CO ~~Organization~~ Denial Verified Approp? Did the M+CO ~~Organization~~ appropriately verify the information which led to the front-end decision to deny membership (without the involvement of HCFA)? Such denial could be for: applicant does not have Part A and/or Part B, ESRD status, or applicant not living in the M+CO's ~~Organization's~~ service area. Determine if the information in the files was clear enough to support such a denial with or without M+CO ~~Organization~~ follow up.

Transfer results to EN01, EN13 & EN15.

Denial Letter Date and Corr Reason Given? Was the applicant notified of the reason for denial/reject, and was the denial/reject based solely on the applicant's failure to meet regulatory requirements for membership? Did the letter provide a clear explanation of the reason for the denial/reject and did it provide information on who to contact for questions about the denial/reject? **Transfer result to ~~EN12~~ EN02, EN13 & EN15.**

M+CO denial made within 30 days receipt of completed application? Transfer results to ~~EN01A~~ **EN02, EN13 & EN15.**

Comments: Self-explanatory.